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PROGRESS REPORT AND LESSONS LEARNED FROM EVALUATIONS AND STUDIES IN UNICEF

SUMMARY

The present report provides an overview of some of the most important findings of UNICEF evaluations and studies over the last two years, as requested by the Executive Board in its decision 1993/5 (E/ICEF/1993/14).

The introduction is followed by a general overview of evaluation policies and strategies resulting from the recommendations of the 1992 and 1993 Executive Board sessions, as well as the recommendations of the evaluation of UNICEF carried out by the Governments of Australia, Canada, Denmark and Switzerland (E/ICEF/1993/CRP.7). It highlights the role of regional offices in the management of the evaluation function in UNICEF and the role of field offices as knowledge centres for women and children. It touches upon the coordination of evaluation functions with other United Nations agencies through the Joint Consultative Group on Policy (JCGP) (UNICEF, the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the World Food Programme (WFP) and the International Fund for Agricultural Development (IFAD)). It then describes some of the major tasks of UNICEF in managing its evaluation activities through reinforcing the evaluation function within the country programme cycle, the continuation of the development and promotion of the evaluation database, capacity-building activities both for UNICEF staff and for national government counterparts and efforts to enhance further essential national research for women and children.

As requested by the Executive Board, the present document also reports on progress made in improving the UNICEF evaluation information system as an integral part of overall information systems for programme planning and management.

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Finally, the report summarizes important findings and analyses of major sectoral and thematic reviews in the following areas: control of diarrhoeal diseases; the Bamako Initiative; protein-energy malnutrition information systems; emergencies; reaching the poorest; area-based programmes; children in especially difficult circumstances; community-based surveillance systems for the eradication of dracunculiasis; education in the light of follow-up to the World Conference on Education for All; water supply and environmental sanitation, with its new emphasis on hygiene education to achieve an effective health impact; and findings in the area of women's productive activities projects.

The annex to the present report provides a description by region of the outcome of lessons learned and findings in major evaluations, studies and operational research.

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I. INTRODUCTION

1. At its 1992 session, the Executive Board by decision 1992/24 (E/ICEF/1992/14) called for a number of measures to be taken to strengthen the evaluation function in UNICEF, covering the following areas: evaluation components of country programme recommendations; an enhanced evaluation database; a thematic rolling evaluation plan; collaboration with partners on evaluation and research; capacity-building and institution-strengthening; and an emphasis on Africa. At its 1993 session, in decision 1993/5, the Executive Board requested the Executive Director to include in the report on evaluation presented to the Board every two years, starting in 1994, a summary of the results of UNICEF programme and project evaluations (E/ICEF/1993/14). The Board further requested the Executive Director to present a synthesis of evaluations of UNICEF programmes and projects, by geographic region, concentrating on findings and lessons learned and measuring or describing qualitatively the degree to which outcomes have achieved the objectives of the programmes or projects as a whole. In addition, the Board requested the Executive Director to report on the status of the UNICEF evaluation information system as part of the process of reshaping overall information systems for programme planning and management. The present document addresses those issues and reports on progress made in the implementation of Executive Board decision 1992/24.

II. MANAGEMENT OF THE EVALUATION FUNCTION

2. Since the 1992 report on overall progress in the implementation of evaluation activities in UNICEF (E/ICEF/1992/L.9), the organization's policy on evaluation and research has been reformulated, based on 1992 Executive Board decision 1992/24 and the findings and recommendations emanating from the 1992 evaluation of UNICEF (E/ICEF/1993/CRP.7). In 1993, an executive directive was issued to provide guidelines on action to be taken to strengthen the management of evaluation and research functions in UNICEF.

A. UNICEF as a knowledge centre on women and children

3. The report on the evaluation of UNICEF (E/ICEF/1993/CRP.7) emphasized the need for UNICEF to develop its capacity as a learning centre on development matters concerning women and children. The capacity of UNICEF headquarters to support countries as knowledge centres on women and children has been strengthened by merging the Evaluation Office with the Research, Programme Publications and Library Section. These units are now brought together as the Evaluation and Research Office to promote the strengthening of national capacities for essential national research for children and women.

4. The Evaluation and Research Office has focused on enhancing field capacity in managing data on women and children at the country level through, inter alia, the production and continuous updating of the country situation analysis as a major source of data, better management of information from evaluation and studies and strengthening field offices to become strong partners in establishing resource centres for knowledge on women and children.

B. The role of the regional office

5. The evaluation of UNICEF also identified an important role for UNICEF regional offices in strengthening the management of the evaluation function and in systematizing the learning process at the regional level for programme and policy development. This includes the monitoring of evaluation and other research activities, the development of a regional peer review process, the creation of linkages with knowledge networks, the dissemination of evaluation and research findings and an increased role in the formulation of strategies at the regional level, as well as at subregional and country levels.

6. In 1992, the Evaluation and Research Office collaborated with the UNICEF Middle East and North Africa (MENA) Regional Office to test an external peer review process to help to improve the planning, management and use of evaluations and studies in the region. This was done by tapping a number of consultative networks of experts from within the region in the areas of maternal health, child survival and nutrition. This effort was built on a well-established regional network in the expanded programme on immunization (EPI), which had been successful in providing management tools for health managers as an integral part of sustaining EPI. The objective was to evaluate current work and build self-supporting mechanisms among those parties already involved in essential research for children and women in the region in order to strengthen regional and national capacities.

7. Also in MENA, an interdisciplinary peer review group, comprised of researchers, programme managers, medical doctors, anthropologists, measurement specialists, international non-governmental organizations (NGOs) and donor institutions, was established in the area of reproductive health. The group reviewed a selection of UNICEF evaluations and studies from the region related to women's health and maternal mortality. The peer review group also reviewed a manuscript commissioned by headquarters on maternal mortality. This effort resulted in a set of specific recommendations to guide UNICEF field offices in work in this field. A second peer review group on the control of diarrhoeal diseases (CDD) has since taken place, involving a network of experts on epidemiological measurement.

8. In 1993, all regional offices began systematically to carry out regional analytical reviews of evaluation results in order to extract findings and lessons learned and to assess projects and programmes. The results of this process are reported in the annex to the present report.

C. Evaluation and the country programme cycle

Integrated monitoring, evaluation and research plans

9. Strengthening the management of the evaluation function at the country level needs to be based upon the development of an integrated monitoring, evaluation and research plan as an essential part of the overall country programme process. In addition to properly planning and carrying out country programme evaluation activities to produce a reliable impact and process data,

these plans can contribute to a national process of identifying applied research needs and priorities for advancing the well-being of women and children.

10. The Evaluation and Research Office has been actively supporting UNICEF field offices in developing integrated monitoring, evaluation and research plans that reflect the evaluation and research needs for each sector, as well as for the country programme as a whole. In Mozambique, for example, the evaluation and research plan includes a logical framework that presents synergisms between programme areas and the indicators monitored, thereby enhancing the usefulness of data generated and providing a framework for integration (e.g., water supply, sanitation and diarrhoea).

Review of past programme experience

11. The 1992 Executive Board requested improvement in the section of country programme recommendations dealing with the past review of evaluations and their use, including the results of end-of-cycle reviews and the summary of the evaluation plan. Special efforts were made to strengthen those sections.

12. As recommended by the evaluation of UNICEF, in the course of 1993, the Evaluation and Research Office has provided support to evaluating country programmes as a whole, on a pilot basis, in Brazil, Egypt, Malawi, the Philippines and Thailand. This support was provided on an experimental basis as a learning exercise for the development of more detailed guidelines for the UNICEF Policy and Procedures Manual (Book D). Examples of the results of those country programme evaluation efforts will be made available to the 1994 Executive Board.

13. Evaluations of UNICEF five-year country programmes are based on the results of the annual, mid-term and end-of-cycle review processes. These review meetings are significant evaluative activities in the UNICEF country programme process. They provide opportunities for ensuring that all previous evaluative results are brought to bear on the design of new country programmes. The Evaluation and Research Office is collaborating with the UNICEF Programme Division and various UNICEF field offices to develop methods better to document the findings and recommendations of strategic meetings such as annual, mid-term and end-of-cycle reviews.

D. The evaluation database

14. The Evaluation and Research Office has been working with field offices to develop a system to improve the UNICEF institutional memory and evaluation management capacity by increasing the use of lessons learned. This system is dependent on the recording of results from evaluations and studies, which can then be shared through the evaluation database.

15. The evaluation database currently contains data on over 6,000 evaluations and studies in which UNICEF has been involved since 1987. It is designed to serve as a tool for strengthening the management of the evaluation and research function in UNICEF. As such, it provides UNICEF field office with a mechanism to increase the use and sharing of evaluation results; to monitor and review the

quality of evaluation activities; to ensure that recommendations from evaluation processes are retained and followed up on; to ensure that previous evaluation results are brought to bear on programme review and strategy meetings; to improve the scientific basis for advocacy; and to improve "transparency" by recording the basis for decisions made throughout the country programme.

16. In May 1993, a test edition of the evaluation database was distributed on CD-ROM to regional offices and selected field offices, in order to evaluate the format and suitability for the user. Following this, a country-specific test edition diskette was sent to all field offices to complete country-specific information regarding lessons learned and follow-up action. The first official version of the evaluation database will be distributed organization-wide on CD-ROM in 1994.

E. The status of the UNICEF programme manager system

17. The evaluation database will also be accessible through the programme manager system, which is currently being developed as the overall UNICEF information system for programme planning and management. In 1991, UNICEF initiated an effort to renew its operating systems, particularly in programme planning and monitoring. The objective of the programme manager system is to improve UNICEF capacity to support government partners in monitoring the goals established for the 1990s and to provide UNICEF offices at all levels with a computerized corporate programme planning system.

18. To date, substantial work has been carried out in identifying needs as a basis for the programme design. Over the past year, significant progress has been made in finalizing the conceptual design of the system and in bringing it to the level of application. A prototype of the programme manager system has been created and is currently being used for demonstration, consultation and discussion purposes.

F. The thematic evaluation plan

19. A thematic rolling evaluation plan is being carried out in order to guide the assessment of the principal programme areas, strategies and critical factors relevant to UNICEF collaboration and to policy and programme development. In a second stage, regional offices were asked to contribute to the thematic evaluation plan process by identifying programme areas for review specific to the unique programme experiences of each region. Critical factors assessed to date through thematic evaluation efforts include CDD, growth monitoring and promotion, emergencies, water supply and sanitation, the Programa de la región Andina de servicios basicos contra la pobreza (PROANDES) (Programme for the Andes) and projects to promote productive activities for women. Other studies in progress include a review of case-studies to identify and analyse conditions and define strategies necessary for the participation of the poorest sectors of the population in development programmes in collaboration with the International Movement ATD Fourth World, an NGO, and operational research focusing on the improvement of quality, equity of access, community participation and other issues, as described below.

G. Capacity-building

20. Over the past two years, the Evaluation and Research Office has placed a major emphasis on evaluation and research capacity-building at the country level. The Evaluation and Research Office conducted intensive training activities on low-cost essential research, evaluation methodologies and community-based impact measurement for UNICEF field office staff and government partners in 20 countries (Angola, Burundi, Chad, Ethiopia, Honduras, Liberia, Madagascar, Malawi, Mexico, Mongolia, Mozambique, Nicaragua, Niger, Rwanda, Sierra Leone, Somalia, Sudan, Thailand, Uganda and Zimbabwe). In several of those countries, the Evaluation and Research Office provided technical support to the UNICEF field office in the development and management of evaluation plans and activities. Two regional workshops, one each for Eastern and Southern Africa and for East Asia and the Pacific, were also conducted, in addition to one seminar carried out for headquarters staff.

21. In addition, intensive eight-week courses were carried out, with support from the Evaluation and Research Office, covering the theoretical and practical bases of epidemiological assessment. Two courses were offered in Mexico, in Spanish, with participants from nine countries. Another course, offered in Portuguese, took place in Mozambique and was attended by UNICEF staff and national counterparts from all five Portuguese-speaking countries in Africa.

H. Enhancing essential national research for children and women

22. To date, the most consistently applied research tool in UNICEF is the country situation analysis. Such analyses are now available in virtually all the countries for which UNICEF has a country programme of support. This basic research document is the single most accessible reference available to all agencies, institutions and individuals concerned with women's and children's issues. However, UNICEF needs to improve the quality of evaluation and other forms of research and use them more systematically. UNICEF field offices are being encouraged to identify applied research priorities based on national programmes of action so that the full power of the research/policy action process in each country is employed to achieve goals set for the year 2000.

23. UNICEF collaboration with national researchers and research organizations has increased. Many UNICEF field offices already work with universities and national agencies. In Madagascar, this collaboration involves a four-way agreement between UNICEF, the Government of Madagascar, the National University of Madagascar and Laval University, Quebec, Canada. In 1993, postgraduate students in the Master's programme in rural development at Laval University, including students from Benin, Burundi, Guinea, Mali and Zaire worked in an area-based programme under the guidance of UNICEF. Each year a cohort of students spends three months working on this project, using the material for their theses. It makes available inexpensive, relatively informed, if not yet skilled, personnel for UNICEF programmes. The initiative also provides an excellent opportunity to bring UNICEF work into an academic forum, exposing a steady flow of future managers to UNICEF's concerns and commitment.

I. Policy coordination with United Nations agencies

24. In accordance with General Assembly resolution 47/199 of 22 December 1992, UNICEF has been collaborating with other members of JCGP to respond to the request of the General Assembly to work towards reaching a "common interpretation of the programme approach, including an effective methodology for evaluation, to be applied by the United Nations system, with due regard to country specific circumstances" (resolution 47/199, para. 13). In July 1993, a report was submitted by the members of JCGP to report on progress and achievements in efforts towards harmonizing evaluation procedures among the different agencies. It was noted that there is already a substantial degree of harmony between the respective evaluation systems in terms of underlying principles, objectives, many of the instruments, definitions and products. The main differences were found in use of terminology, procedural details, emphasis and institutional framework. Further work will continue to reduce those differences and to ensure a common understanding of concepts and facilitate the sharing of information. A report on this effort will be submitted to the United Nations Secretariat by JCGP for presentation by the Secretary-General to the Economic and Social Council.

III. LESSONS LEARNED BY REGION

25. In all regions, the overall number of evaluations and studies peaked in 1990 and 1991 (see table 1). Reduced numbers in 1992 and 1993 reflect the change in emphasis from increasing the numbers of evaluations and studies undertaken to improving the quality and use of results and the reduction in project-level evaluations (especially numerous EPI coverage surveys) and a shift to programme-level evaluations.

Table 1. Number of evaluations and studies completed by region, 1990-1993 a/

	1990		1991		1992		1993	
	Evaluations	Studies	Evaluations	Studies	Evaluations	Studies	Evaluations	Studies
East Asia and the Pacific	50	74	55	87	49	35	12	15
Eastern and Southern Africa	73	146	67	129	30	31	22	81
Middle East and North Africa	52	60	21	83	41	81	19	68
South Asia	56	98	47	91	41	73	35	70
The Americas and the Caribbean	52	123	89	179	71	111	63	105
West and Central Africa	37	87	58	72	29	66	34	63
Other, interregional	2	1	4	6	6	21	0	1
Total	322	589	341	647	267	418	185	403

a/ The number of evaluations differs from data given in previous reports since new reports are received continuously by the Evaluation and Research Office for preceding years.

26. In the regional reviews of findings and lessons learned, there were several issues common to evaluations, projects and programmes. Monitoring and evaluation should be part of project/programme designs. More effective target-group analysis must be conducted in order to maximize outcome and focus intervention. Project/programme designs should be based on clear identification of the context and institutional framework (commitment, responsibilities and functions of partners). Specification of objectives and goals or expected results should be clearly defined. To ensure sustainability, attention must be paid to financial and technological feasibility, as well as to increased involvement of the community in the design, implementation and evaluation phases. There needs to be more cost-effectiveness analysis and innovation in the use of effective qualitative indicators. The annex provides brief highlights of a sample of evaluations and studies conducted in each region.

IV. LESSONS LEARNED: THEMATIC AND SECTORAL REVIEWS

27. This section describes findings of and lessons learned from studies and evaluations covering major sectors or subject areas directly related to UNICEF activities. Overall, as illustrated in table 2 below, the relative percentage distribution by subject area of evaluations has remained consistent, except for a decrease in the area of health. In the health sector, the number of evaluations has decreased, owing mainly to a drop in the number of evaluations related to universal child immunization (UCI).

Table 2. Percentage of evaluations and studies completed by major programme category, 1990-1993 a/

	1990		1991		1992		1993	
	Evaluations	Studies	Evaluations	Studies	Evaluations	Studies	Evaluations	Studies
Health	47	27	48	33	42	26	37	23
EPI	28	6	20	4	11	4	15	3
ORT	7	5	5	4	7	4	4	2
Education	16	12	14	13	18	16	18	21
Women and productive activities	2	15	5	15	15	13	11	11
Water supply and environmental sanitation	14	7	14	9	10	8	8	12
Nutrition	13	15	11	14	13	15	10	14
Communication, advocacy and social mobilization	10	6	10	9	10	8	5	6
Training	8	2	7	4	4	3	5	1
Area-based programmes	6	5	5	4	8	5	4	1
Children in especially difficult circumstances	2	7	3	9	4	12	4	6
Emergency	1	1	2	1	1	2	3	1

a/ Since some evaluations and studies are multisectoral, the total of the percentage of evaluation and study categories does not equal 100 per cent.

28. For studies, the percentage distributions are also relatively consistent, except for a steady increase in the area of education and a decrease in all health-related categories.

A. Control of diarrhoeal diseases

29. As a part of the thematic evaluation rolling plan, the Evaluation and Research Office, together with the Child Survival Unit, initiated a review of the existing literature on CDD in the last decade. This area was selected for review because it has been a major focus of UNICEF efforts in the health sector, because there is concern about continued and sustained coverage and because it is a priority objective among the set of intermediate goals to be achieved by 1995. The results of the review are being used for policy and programme formulation.

30. The review was conducted by five internationally known persons and institutions, with the participation of the World Health Organization (WHO). Five regional reports were produced, each with about 50 standard abstract sheets of reviewed literature. The lessons learned from the review have been summarized in an overview report and are being used for developing UNICEF strategies for CDD.

31. The review showed that the technical basis of the case-management strategy developed by WHO was sound. Acute watery diarrhoeas continue to be the greatest problem. The emergence of persistent diarrhoea and dysentery in some regions requires specific nutrition and antibiotic therapy in addition to oral rehydration and feeding. However, very recent evidence shows that dehydration accompanies all deaths from diarrhoea of any type, underscoring the need for a much greater emphasis on the promotion of oral rehydration salts (ORS) and oral rehydration therapy (ORT).

32. In general, the absence of rigorous and widespread data on morbidity and mortality patterns was noted, although there were several studies that documented a decrease in the proportion of severe cases presented at hospitals. Monitoring through the national CDD programme was done in only few countries, for example, Egypt and Morocco, but it did not provide data at the district level, where implementation is focused. The guidelines for monitoring the mid-decade goals, which have been distributed to field offices, incorporate these issues in community- and health facility-level indicators. UNICEF is supporting the strengthening of the district approach through comprehensive plans in training, information systems, supplies and logistics at the district level. Nigeria has taken a lead in developing such an approach.

33. Community-level information in many countries showed that the majority of people take their children outside the government system for treatment, to village healers, pharmacists and private physicians. Therefore, the monitoring guidelines now include providers beyond the government health sector. Also, noting the practice of these providers to overprescribe antibiotics, these guidelines now include an indicator on provider compliance with ORT.

34. The limited use of ORT in approximately only one third of the cases of diarrhoea only has led to the decision to promote strongly this life-saving technology as a family habit, combined with a cross-sectoral emphasis on prevention strategies such as breast-feeding, immunization against measles and sanitary practices. Among others, specific studies, in the Philippines and in Bangladesh, by the Bangladesh Rural Advancement Committee, on family-level care and on the use of appropriate fluids available in the home, have indicated the need for revised communication and health education activities addressed to a wider group of family members and promotion of the use of those fluids available in the home.

35. Finally, in Brazil, data showed that mothers could correctly prepare sugar-salt-solution (SSS) if properly taught and supported and that a larger proportion of mothers prepared SSS correctly compared to the proportion preparing ORS correctly. Based on this finding, it was decided not to discourage Governments from promoting SSS if they are already doing so, despite an earlier WHO policy to the contrary based on previous data that showed mothers preparing SSS incorrectly.

B. Bamako Initiative

36. The evaluation of the Bamako Initiative, sponsored by the Danish International Development Agency (DANIDA), the Norwegian Agency for International Development (NORAD), the Swedish International Development Authority (SIDA), the Overseas Development Administration (ODA) of the United Kingdom of Great Britain and Northern Ireland, WHO and UNICEF and presented to the Executive Board at its 1992 regular session (E/ICEF/1992/L.20), put the Initiative forward as an appropriate path towards the development of primary health care, while recommending improvements in the quality of services, affordability/pricing structures and payment mechanisms, cost-recovery and the role of communities. The Board, in decision 1992/22, urged UNICEF to undertake further field-level operations research, drawing on a range of in-country experiences, to refine the community-focused approach of the Initiative (E/ICEF/1992/14.

37. UNICEF established a programme of operations research focusing on the improvement of quality, equity in access, community participation, management of essential drugs, the motivation and performance of health workers and sustainability. After a review of research proposals by both a scientific peer group as well as by a research steering committee, 14 proposals out of 37 have been accepted for funding, covering 14 countries in sub-Saharan Africa and 2 in South-East Asia. All proposals involve a linking of research institutes with government implementing agencies and local UNICEF offices to ensure that practical approaches are followed and that results are fed immediately into the implementation of the Initiative.

38. UNICEF has gradually built up a partnership in this operations research programme. The programme has already received supplementary funds from the Governments of Norway and the United Kingdom, and a cofinancing relationship has been established with the International Development Research Centre (IDRC) in Ottawa, Canada, on proposals put forward by African research institutes. The

majority of the proposals cover from one to two years, allowing for rapid inputs into the implementation of the Initiative. It is foreseen that the research designs developed will be of relevance to many more countries than those chosen initially. Thus, over time, the scope of the research programme will be broadened in finding workable solutions for the basic constraints encountered in health systems in developing countries.

C. Protein-energy malnutrition-oriented information systems

39. Over the last three years, UNICEF has evaluated its support to nutrition information systems, based on measurement of nutritional outcomes at household and community levels (growth monitoring) as well as at regional and national levels (nutrition surveillance). Different universities, NGOs and various United Nations agencies were involved in this exercise. Reviews and field work were conducted in Africa, Asia and Latin America. The focus of the evaluation was to measure the extent to which information systems lead to positive actions for child nutrition. In programmes covering a wide geographic scope, the degree to which actions had been stimulated was disappointing. At local levels, both the resources required to train monitors and the voluntary time required by monitors to become analysts and mobilizers were found to have been underestimated. Financial resources were insufficient to train the required number of people and training curriculums were too limited. These combined problems led to low job satisfaction and poor performance. For example, coverage of target age-groups of children was rarely found to exceed 60 per cent, too little time was spent on analysis of data and there was a high drop-out rate for monitors. At national levels, nutrition surveillance relied too much on technicians specialized in the collection and manipulation of anthropometric data, which are not sufficient to stimulate nutrition-oriented actions. Other types of information, both quantitative and qualitative, that examine relationships between the underlying causes of malnutrition are also needed. A mix of different communication strategies also needs to be included as an integral part of nutrition information systems. UNICEF has been applying these lessons in almost two dozen countries over the last two years by supporting the development of capacities to service decentralized context-specific information systems that link data on nutrition outcome to information on underlying causes of malnutrition. Further efforts are being made to ensure that all countries integrate these lessons into their programmes and planning.

D. Emergencies

40. In 1991, a desktop thematic evaluation of UNICEF work in emergencies over the 10 preceding years was carried out. The first phase of the evaluation included a review of literature related to the UNICEF emergency response, looking specifically at the headquarters perspective, with focus on management issues. It was based on a large number of interviews with key staff in New York and Geneva. Several recommendations emanated from this review, leading to the establishment of a high-level task force, which made a number of decisions in terms of streamlining funding, restructuring of the headquarters Emergency Unit and clarifying relationships and responsibilities for responding to emergencies

in terms of the various divisions at headquarters locations and regional and field offices.

41. The first phase was followed by an evaluation of the emergency programme in Liberia. The impact of the programme was measured at the community level, based on an analysis of existing data, rapid assessments and community-based epidemiological studies. Emphasis was on development of measurement capacities in the four main sectors of operation: health; water supply and sanitation; education; and children in especially difficult circumstances. A parallel operations review evaluated (a) the process of priority setting; (b) the timeliness and appropriateness of supplies; (c) the timely availability of funds, including cash-in-hand for the resolution of short-term difficulties; (d) personnel and recruitment decisions; (e) support from the headquarters' Emergency Unit and Africa Section and the regional office; (f) mobility, communications and security; (g) inter-agency cooperation (including NGOs) and diplomacy; and (h) the role of and implications for surrounding countries, including the UNICEF field offices in those countries. The Liberia emergency evaluation contributed to the development of a situation analysis and the next country programme. It resulted in the development of national capacities on both sides of the conflict. In addition, the process contributed to the development of an emergency evaluation methodology that could be applied in other situations.

42. The Evaluation and Research Office, together with UNFPA and the UNICEF field office in Haiti, commissioned the Center for Population and Development Studies of Harvard University (United States of America) to carry out an independent assessment of the impact of sanctions imposed by the United Nations Security Council on the situation of children in Haiti. Preliminary results showed a considerable increase in infant mortality rates owing to the overall context of mismanagement by the military Government, combined with the impact of the sanctions. It is expected that further in-depth longitudinal studies will take place as a follow-up to this rapid appraisal in Haiti.

E. Area-based programmes

43. In line with the UNICEF policy to support capacity-building for decentralized, community-focused management and to strengthen subnational capacities to measure impact, efforts have been made over the last two years to render evaluations of area-based programmes more participatory in Chad, Ethiopia, the Niger and Uganda. Resources have been invested in training intersectoral teams of people from national, regional and local levels to devise and carry out assessments and to analyse quantitative and qualitative information that measures the impact, coverage and costs of interventions and behaviours. For example, a recent cycle of research in the Niger during the 1993 wet season focused on the problem of fever. A multidisciplinary group of 40 trainee researchers representing national, regional and local interests found that one third of children had an episode of fever every two weeks and that the average total cost of treatment was $3 per episode.

44. In Bolivia and Ecuador, PROANDES attempts to address the problem of critical poverty while promoting empowerment. A multidisciplinary thematic

evaluation of PROANDES, analysing quantitative and qualitative information, provided an anthropological assessment of child survival and development actions. PROANDES Bolivia was found to be successful in developing a sustainable approach with communities owing to a keen understanding of community needs and strategies of subsistence. The Bolivia programme had also been successful in cooperating with NGOs, state and local institutions, the Amerindian communities and their representatives. However, in Ecuador, it was found that understanding the cultural and social networks of communities required more open communication with representative leaders and peasants of those areas. Through the "learning from each other approach", PROANDES has promoted the amalgamation of Western medicine and traditional medicine in health services and training activities. In health, the evaluation reported limitations in the ability of government institutions to reach community levels and obtain community cooperation.

F. Children in especially difficult circumstances

45. A sample of the reports on the UNICEF experience in the Americas and the Caribbean region with programmes for children in especially difficult circumstances were reviewed. This region was selected because of its pioneering work in the field, which resulted in over 90 per cent of the countries having completed situation analyses in this area and several having progressed considerably with implementation.

46. Working children and street children share the same socio-economic conditions. They generally come from large, low-income families with a high incidence of absentee fathers and, often, unemployed heads of household. Evidence suggests that problems in the family, rather than lack of educational opportunity, may be a decisive factor. While both street children and working children generally have good relations with their mothers, street children typically have poor or non-existent relations with their fathers.

47. The problem of street children is of manageable proportions for public and private institutions. New welfare institutions should not be created, but rather existing institutions should improve their programmes to enhance coverage. Attitudinal surveys suggest that these children have aspirations and sufficient cognitive resources to benefit from directed intervention. In addition, positive attitudes, especially towards the mother, suggest the feasibility of family-based interventions.

48. The Brazilian experience suggests the importance of the following strategies for effective intervention: inter-institutional coordination; child and educator co-participation in rule- and decision-making; integral approaches to health, education and survival; promotion of family ties; mobilization of street-based educators; and changing the behaviour of repressive authorities. Emphasis must be placed on prevention. Coordination with NGOs and church-based organizations can significantly improve efforts to work with street children. However, prevention, through the provision of those material conditions that improve family coherence, should be the domain of state policy.

G. Children in situations of armed conflict

49. The Evaluation and Research Office, in collaboration with the Programme Division and the Office of Emergency Programmes, organized a review of psycho-social programmes for children in situations of armed conflict. It was emphasized that it was important to recognize that traumatized children, without interventions to alleviate and treat conditions, could suffer long-term reactions. These include ongoing physiological and mental distress symptoms, or re-enactment behaviour and re-experiencing of the phenomena at any time in the case of suppressed memories. The extent to which trauma affects a child depends on a number of mediating factors, including the severity and frequency of the traumatic experience, the developmental processes within the child, the availability and coping capacity of the parents, as well as the solidarity of the community.

50. The UNICEF experience in Guatemala, the Philippines and Sri Lanka shows that a community-based integrated approach focusing on preventive, educational public-health psychology works well in combination with ongoing programmatic child development efforts. However, whenever possible, such community-wide efforts should be complemented with specific trauma counselling and treatment for children who have been identified as having been traumatized significantly. This is done in Bosnia and Herzegovina, Croatia, Iraq and the Federal Republic of Yugoslavia (Serbia and Montenegro). Community-level resource persons, including parents, teachers and workers, can be trained to provide therapeutic care for children exposed to violence. Lebanon's peace-education experience shows the importance of incorporating an educational component into psycho-social programmes for changing attitudes, behaviour and value systems to address exposure to chronic violence.

51. While the monitoring of these programmes can include indicators for policy changes as well as service delivery and capacity-building, the evaluation of their impact is challenging for both the short and the longer term. Intermediate outcome variables, including attitude and behaviour change towards children's developmental needs, protection, stimulation and basic counselling, can be measured. However, the identification and development of culturally appropriate indicators of development and mental well-being need to be developed based on feedback and experience with communities and psychologists. The identification of impact measurement indicators still needs continued effort for development and testing under different socio-cultural settings.

H. Community-based surveillance in the eradication of dracunculiasis

52. Work has been carried out to support the establishment of community-based surveillance systems in all the African countries where dracunculiasis is endemic. These systems are based on a network of village volunteers in all the affected villages, each of whom visits every household once a month to record cases of the disease. The results are fed through a supervisory hierarchy to the national level. The systems have been fully operational for several years in Ghana, Nigeria and Cameroon, as well as in a few pilot zones in other West African countries.

53. The main efforts of Nigeria's dracunculiasis eradication programme are focused on the 84 most highly endemic local government areas. Additional staff have been assigned to those areas and additional support activities have been undertaken. The list is updated annually based on data collected from the surveillance system. In Ghana, a decision was made recently to focus national programme efforts in the northern region, not only because it is the most highly endemic region, but particularly because the surveillance results show that the number of cases is declining more slowly there than in the rest of the country. UNICEF commissioned the Organization for Coordination and Cooperation in the Control of Major Endemic Diseases to carry out an operational evaluation of the pilot programme in Burkina Faso and particularly to assess the sensitivity of the surveillance system. The results indicated that the performance of the village volunteers was far better than expected, although their results were not always transmitted to provincial level. These results were used for advocacy purposes during negotiations with the World Bank on the funding of the programme.

I. Education

54. A review of a sample of evaluations and studies in education was undertaken in collaboration with the education cluster to assess follow-up to the World Conference on Education for All and to identify findings and lessons learned. Evaluations have begun to focus on the outcome of educational efforts and learning achievement in addition to process and material support efforts. In Mauritius, an evaluation was undertaken with sound study design and the resulting multiple regression analyses can be considered representative. The correlates of performance for students were determined to be the motivation of teachers and their attitudes towards teaching, the socio-economic status of students, their attitudes towards school and the curriculum, their perceptions of teachers, reading habits, the provision of extra educational facilities and general intelligence.

55. The importance of good pre-school education in its contribution to improved performance at the primary school stage is being assessed in some countries. In Honduras, such an evaluation showed that primary schoolchildren who had completed a UNICEF-sponsored pre-school programme were less likely to drop out than those who had not enrolled in such a programme. In the Dominican Republic, despite some obvious deficiencies in teaching methods and resources, primary schoolteachers reported that first graders who had completed the pre-school programme showed more rapid learning, self-confidence and a higher level of class participation. In addition, a similar evaluation in Viet Nam showed that those children had better psycho-motor coordination. However, in this case, comparisons were made between children attending formal versus home-based day-care centres in rural and urban settings and differences were more pronounced in urban settings.

56. In efforts to reduce gender disparity, more studies are being undertaken to determine effective strategies. The MENA Regional Office has prepared a report that lists 16 strategies for improving girls' participation in schooling and women's participation in literacy classes. The strategies include creating the appropriate political climate, enhancing physical facilities such as latrines,

improving single-sex schools and enhancing the training and role of teachers as agents of change. Also included were building peace education and conflict resolution into the curriculum and the use of the "third channel", particularly for out-of-school girls. In Sierra Leone, a guide has been developed for determining perception and practices towards girls' school attendance. Although, politically and socially, the concept of equal access to education and later wage-earning potential for girls is supported, there is still quite a gap between achievement for boys and girls. Causes of girls' failure in school include overwork in the home and fields, irrelevant curricula, school fees and sexual harassment. The incidence of early marriage and pregnancy also contributed to high drop-out rates for adolescent girls.

57. The Evaluation and Research Office collaborated with the Consultative Group on Early Childhood Care and Development to organize a workshop on child-rearing practices and beliefs in sub-Saharan Africa in order to identify existing research in this area and to provide baseline information on the current state of knowledge for use in policy and programme formulation. The workshop contributed to strengthening the network of individuals and institutions in the region, which are contributing actively to this knowledge base through implementation of programmes for early childhood care and development. The results of the workshop will be used to provide guidelines on the assessment of child-bearing practices and beliefs in situation analyses, as well as recommendations for moving this knowledge into action through community-level programmes.

J. Water supply and environmental sanitation

58. The Evaluation and Research Office, in collaboration with the Water Supply and Environmental Sanitation Section, carried out a review and organized a workshop to promote cost-effective strategies towards a "software" approach for this sector, away from the traditional service delivery role of the past. Among the major topics discussed were state-of-the-art techniques for monitoring and measuring health and socio-economic impacts, including nutritional impact, and how to measure behaviour change.

59. The major issues that emerged included enhancing (a) empowerment of communities, and particularly women, through effective participation in decision-making, planning, design, management and evaluation of water supply and sanitation programmes; (b) capacity-building at the national level for sector monitoring and at decentralized, community levels for developing skills for monitoring and evaluation through establishing appropriate indicators and communication of results; (c) planning for effective service delivery through the development of action-oriented research, with community involvement and feedback focusing on the household; (d) building linkages with other strategic sectors and organizations, particularly for improving the effectiveness of hygiene education; and (e) advocacy as a central component for facilitating the above actions as well as to reorient global resources away from hardware delivery to low-cost technologies and services for reaching the unserved.

K. Women's productive activities

60. A three-day consultation was held on strategies and operational efforts in support of women's productive activities. It was recommended that the overall objective of UNICEF-supported women's productive activities should be to increase women's access to and ownership, control and management of productive resources to meet their needs. Three principles were found to be fundamental to the success of projects in this area: (a) projects should be participatory, i.e., women should be involved in the identification of needs in the planning, management and execution of projects and they should have ownership of projects; (b) projects should build on traditional credit and savings systems already in place and on poor women's existing management and organizing capabilities; and (c) all support to women's productive activities should strive towards sustainability and scale.

61. Meeting the needs of poor women requires a combination of strategic advocacy efforts aimed at changing the political and institutional context that puts women at a disadvantage and at practical interventions aimed at giving women access to productive resources such as credit. UNICEF efforts in support of women's productive activities should link local action and capacity-building at the community level with networking and advocacy at the national level.

V. CONCLUSION

62. Over the last two years, UNICEF has continued to improve its capacities for evaluation and essential national research for children and women. The Evaluation and Research Office is focusing its role on strengthening the management of the evaluation function at regional and country levels. It also carries out the headquarters function of programme and policy development by conducting thematic evaluations and sharing lessons learned. Regional offices are becoming the pivotal agents in coordinating and reviewing evaluation activities at regional and country levels and the building of regional knowledge and research networks.

63. UNICEF will reinforce further evaluation capacities at the country and regional levels to assist in the achievement of the decade goals, proper assessments of those achievements and the application of lessons learned to ensure sustainability of achievements. In the coming two years, the Evaluation and Research Office will focus on:

(a) Assessing experience with the pilot country programme evaluation exercises in order to elaborate and strengthen methodologies applied and to promote the application of this evaluation methodology in all country programming exercises;

(b) Reinforcing the capacity of regional offices to manage regional networking and coordinate thematic regional evaluations and studies; to make secondary reviews of evaluations and studies done at the country level; and to strengthen the overall lesson-learning process at the regional level;

(c) Enhancing further the evaluation database and promoting its use organization-wide and within collaborating agencies;

(d) Enhancing capacities in evaluation methodologies of UNICEF staff and national counterparts;

(e) Improving UNICEF field offices as resource centres that are a basis for the establishment or strengthening of knowledge centres for women and children in the countries where UNICEF cooperates.

64. The above-mentioned consolidated efforts will contribute to reinforcing the importance of evaluation in the context of country programmes implemented jointly by UNICEF and Governments and will ensure that adequate attention is paid to the impact of UNICEF country programmes.

Annex

REGIONAL REPORTS OF LESSONS LEARNED

1. A comprehensive listing of the lessons learned in each country in each region would be excessively long, even if it were possible. UNICEF pursues a decentralized approach, under which UNICEF field offices, with the guidance and support of the regional offices, are responsible for programme preparation and review, including drawing lessons from past and ongoing experience. The following brief summary of lessons learned draws on summaries of this experience prepared primarily by regional offices.

A. Eastern and Southern Africa

2. A review of evaluation results touches upon primary health care (PHC) programmes, gender issues, the establishment of baseline data, a literacy programme, water supply and sanitation programmes and emergency programmes.

3. In Lesotho, a review of past experience revealed a weak situation analysis and the need to develop performance indicators, which were addressed in the new country programme. A review of the status of the PHC programme identified the need to upgrade skills of health personnel. Following an evaluation of the child nutrition and household food security project, it was decided to expand project activities to four additional districts and to intensify nutrition education components. The need for strengthened supervision and quality control of community health workers (CHWs) was identified and addressed in the new country programme. It was found that virtually all children had health cards, but the lack of knowledge by health workers of the exact immunization schedule was the cause of a low immunization coverage rate at the appropriate age.

4. In Malawi, an evaluation of gender issues in community participation identified the lack of access by women to credit as a major concern. Drought affected both smallholders and small business households, but smallholders coped better. Mapping and targeting of vulnerable groups needed improvement. Relief operations other than food distribution, such as the promotion of off-farm employment, needed consideration. A growth monitoring evaluation found that not enough resources had been devoted to counsellor training and that the curriculum was medically biased. Hence, there was little dialogue about the problems of household food security and child care. Counselling of child caregivers tended to be perfunctory. One result of an EPI evaluation was the decision not to replace the 20-dose polio vaccine vial with the 10-dose polio vaccine vial since it was found that other related costs (larger transport and handling costs, increased cold-storage requirements) would outweigh desired savings on vaccine costs.

5. In Mozambique, UNICEF has been working on building capacities for evaluation with a group of almost 150 people from different sectors in the Government. One of their activities resulted in a survey of over 7,000 households, representing the population in secure parts of the country. Similar

work is now under way in Ethiopia. The data could serve as a baseline for measuring the impact of the 1994-1999 programme.

6. In Namibia, an evaluation of the literacy programme led to the establishment of a non-formal education department in the Government. An evaluation of the area-based programme identified the need to improve the integration of component activities and led to a review and modification of the overall objectives of the project.

7. In Rwanda, approximately 100 civil servants from different sectors were trained in measuring impact, coverage and costs in three cycles of training in sentinel community surveillance. Water supply and sanitation programmes and emergency programmes related to the civil war and to displaced Burundian refugees were evaluated through this capacity-building effort. Some of the quantitative findings of the evaluation were that the chance of young children having diarrhoea was 30 per cent higher in households with bad sanitary arrangements, 20 per cent higher for those in households where the water storage was not covered and 10 per cent higher for those living in households that did not get their water from a good source. Those results were fed back to communities as a basis for discussions about diarrhoea, water supply and sanitation.

8. In Zimbabwe, community-based hand-pump maintenance was scheduled for expansion following the evaluation of a pilot project. Advocacy efforts by sectoral line Ministries and budget discussions with the Ministry of Finance followed an evaluation of the impact of the structural adjustment programme and the drought. The evaluation was based on data from a panel of over 40 sentinel communities representing conditions in the country as a whole. It also resulted in capacity-building for measurement in an intersectoral group of approximately 80 civil servants.

B. West and Central Africa

9. Out of 16 evaluations carried out in 1992 and 1993 that were reviewed, 14 focused on EPI, the Bamako Initiative, nutrition and dracunculiasis. The two other evaluations were on urban poverty and a knowledge, attitudes and practices (KAP) survey on health issues, both especially relevant to the situation in the region. The recommendations and lessons learned from 9 of the 16 evaluations were used in annual/mid-term reviews and strategy meetings and have influenced further project development.

10. A review of evaluations on health care in Benin, the Central African Republic, Guinea-Bissau and Sierra Leone showed that mothers' access to information, distance to the health centre, the socio-political context (strikes), cost and, most of all, quality are the determining factors for people in their choice of health care. A reinforcement of community participation in health services through committees was recommended. Communities are prepared to pay for health services as long as they are affordable and there is flexibility in when the payment is to be made. Training in resource management, accounting and basic analysis of local health problems, motivation of staff and the

establishment of an effective monitoring system are essential to improve the capacity of health services further.

11. A study in Sierra Leone revealed that goitre problems are prevalent in 75 per cent of households. The majority of the population perceives goitre as a serious problem and all concerned groups expressed a willingness to buy, trade, produce and import iodized salt. It appears feasible to iodize and monitor 75 per cent of the salt in the country since 75 per cent of the distribution takes place through just two trade networks. The study also indicated the need first to establish the legislation and iodization of salt before a social mobilization campaign is initiated. This strategy is now being followed.

12. In the rainy season, 90 per cent of the population in rural areas in Mauritania is at risk of being infected with dracunculiasis. A KAP survey on dracunculiasis assessed that 75 per cent of families have received a water filter through the programme. Thirty-five per cent of families were aware of the link between drinking water and dracunculiasis, but only 4 per cent knew that people infected with dracunculiasis could contaminate the water.

13. A KAP survey on the use of ORT in Benin pointed out that although 70 per cent of the women knew about oral rehydration salts (ORS), only 30 per cent used them correctly. However, the continued provision of food and liquid is observed in 60 per cent of the cases. Increased availability of ORS at health centres and the training of health workers in proper case management of diarrhoea need to be ensured to improve the situation.

14. In Sierra Leone, the urban population has risen from 9.2 per cent of the total population in 1950 to 32.2 per cent in 1990. This massive shift to urban areas, where people live in abject poverty, has been exacerbated by the unrest in the south-eastern part of the country. Moreover, in the northern rural areas where farming is the major source of income, the incidence of poverty is high. In that area, a combination of land tenure, malpractice of buying agents, high prices of essential foods and prohibitive transport aggravate the situation. One of the evaluations showed that 62 per cent of the total budget of poor families is spent on food. Since malnutrition is closely related to poverty, it is recommended strongly that poverty alleviation programmes should focus on increasing productivity and human capacity. Income-generation initiatives, improvement of knowledge and skills for women, better education, increased access to health facilities, access to credit, transportation and marketing facilities should be considered. This could also contribute to preventing further rural-urban migration.

15. Although most evaluations verified a positive impact resulting from UNICEF-assisted interventions, the use and reference to baseline data were rarely made. The comparison of baseline data would better substantiate the progress being made. Another general lesson learned from the regional review is that costing and financing is an area that is mostly neglected. Here too, baseline data on costs would be crucial to assess cost-efficiency in different programme areas.

C. Middle East and North Africa

16. This review of lessons learned includes brief reviews of an area-based programme, a student achievement evaluation, the nutritional status of refugees, a national CDD programme, a rural women's project and a water supply and environmental sanitation programme.

17. The Antalya Gecekondu project in Turkey provides an example of a project with community participation and a built-in monitoring and evaluation design that shows elements of empowerment and sustainability. An essential component was the development and strengthening of social infrastructure to facilitate community participation, particularly in a context where grass-roots participation was not part of the political culture. Women were empowered by the project to articulate their problems to the Government, demanding services that they were entitled to, organizing to improve their environment and applying newly applied knowledge to resolve health and household problems. One constraint was the need for carefully selecting sectors for UNICEF partnership in order to consolidate cooperation with key sectors. The focus of environmental upgrading efforts should include community mobilization in addition to physical improvements. More information on urban job training and marketing opportunities is needed for effective income generation.

18. In education, an innovative testing instrument for assessment of student achievement was developed in Turkey with the assistance of national institutions and academicians. The assessments showed that most students had inadequate proficiency levels for mathematics, science and the Turkish language. Schools showed significant differences in mean achievement scores even within specified residential areas, with village schools scoring the lowest. The study recommended that, in addition to that test, other non-written techniques, such as performance evaluation and observation, should be used to complement and provide a more holistic view and that the composite system should be replicated and tested on an expanded scale. The use of such results in advocacy with local authorities was suggested.

19. As part of emergency assessments in the western part of the Islamic Republic of Iran, a rapid nutritional assessment of Kurdish refugee children was conducted to help to focus the nature and extent of UNICEF assistance. Anthropometric results showed that 35 to 45 per cent of under-three-year-olds were moderately to severely malnourished and 20 to 47 per cent were stunted, indicating prior malnutrition. Clinical analysis substantiated the anthropometric measures. Because of highly unsanitary conditions prevailing in the camps, immediate public health interventions for improving the environment were recommended in order for feeding interventions to be beneficial. In the short run, to avoid food contamination, it was recommended that feeding centres provide nutritionally balanced feeding with micronutrient supplementation, while also allowing monitoring of the nutritional status of the children.

20. In the Sudan, a review of the CDD programme identified constraints in overall programme management, including turnover and shortage of staff; limited relations with the PHC directorate at the Ministry of Health, resulting in inadequate coordination; and difficult communications regarding activities at national and state levels, particularly to relevant PHC departments and NGOs.

In the political context of the Sudan, refugee flows in the east and heightened security problems in the west constituted an additional barrier to the expansion of CDD activities. ORS was reported to be widely available at various facility levels, but it was not clear if stocks were based on estimates of diarrhoea prevalence or catchment populations. There were reports of the misuse of drugs by doctors.

21. In Egypt, a comprehensive evaluation of the rural women's project was undertaken in collaboration with the Ministry of Social Affairs. All projects were found to have succeeded in income generation and those that have shown more prospects for sustainability will be promoted further. However, a significant constraint identified is the inadequacy of targeting criteria, so that the project did not reach the poorest. Thus, the requirement of a 25 per cent down-payment for a loan actually prevented the poorest from participating. Projects involving traditionally male activities were controlled by husbands. Women need greater support in these projects in the area of improved skills development and management control in order to overcome such sexual stereotyping, thus allowing them to be involved more integrally in development. The low attendance of participants in the literacy programme suggests the need for the greater involvement of women in deciding on the location, timing and content of the programme. Finally, better marketing strategies needed to be explored and support systems for veterinary services and machine repair ensured.

22. In Upper Egypt, an evaluation of the water supply and environmental sanitation programme conducted by the Save the Children Fund (United States of America) looked at technical performance, local capacity-building and utilization and outcome on quality of life. In general, UNICEF projects successfully increased the amount of water available and made villagers aware of the importance of water quality, although sanitary practice lagged behind knowledge. The programme significantly reduced women's workloads to the extent that, in three out of the four governorates, husbands paid for water supply connections in order to reduce women's physical workload. Among the findings on technical performance was the finding that several hand-pumps (in some areas 30 to 40 per cent) were not working despite the presence of trained technical staff. Therefore, it was recommended that villagers, and especially women, should be trained in maintenance. Latrines (at present a dry latrine design) needed to be redesigned to fit the local cultural need for washing with water. Ownership by local administrative officials and the community needs to be enhanced through dialogue and written agreements, which will ensure accountability and continuity even when UNICEF phases out. Also, in spite of the willingness of the community to contribute labour and up to one half the cost for household water connections to established networks, projects were left incomplete because of insufficient government funds. Regarding the quality of life, women have saved significant time and energy from water-hauling and were the force behind households investing in a convenient water supply. The linkage between water supply, sanitation and hygiene education was very weak and the new UNICEF policy gives priority to providing water to areas where health education already has taken place.

D. East Asia and the Pacific

23. Since the 1990s, there has been an increase in impact evaluations in the East Asia and Pacific region. Coverage evaluations have had a slight decline since the focus on achieving UCI in 1990. The number of evaluations and studies that measure cost/financing aspects, management processes or KAP are part of an increasing trend.

24. In addition to the continuing increase in the overall number of evaluations and studies being carried out in the East Asia and Pacific region, monitoring and evaluation itself is becoming more essential in the programming process. Thailand, for example, recently conducted an evaluation of AIDS in children, which revealed that the continuation of the current levels of infection would result in a reversal of the present decline in infant and under-five mortality rates around 1995, with increasing rates thereafter unless more preventive action is taken. Based on the results of that evaluation, the new country programme cycle for the period 1994-1998 contains a reformulated AIDS strategy and has made a significant increase in the budget amount allocated to the AIDS programme. In the Republic of Korea, two communication studies, an advocacy review and an image survey provided the basis for setting strategies to improve the transformation of the UNICEF office to establish a Republic of Korea National Committee for UNICEF.

25. A review of the Kejar Usaha Bank credit scheme, which is part of the Government of Indonesia/UNICEF cooperation in non-formal education, found that combining literacy learning through the income-generation programme was not effective. However, combining child survival and development (CSD) education and income-generation programmes in Indonesia was found to have a positive impact. An evaluation of CSD learning and income generation for poor women project had a positive impact in increasing family income. In particular, additional income was found to be channelled to improved child health, nutrition and welfare.

26. A tripartite health and education evaluation conducted by the Ministries of Public Health and Education of Thailand and UNICEF found that the training of female students of mosque schools to act as volunteers in support of CHWs and Islamic religious leaders had a positive impact on the increase of PHC/maternal and child health coverage.

27. An assessment of the effects of the International Drinking Water Supply and Sanitation Decade (1981-1990) in the Lao People's Democratic Republic suggested that, despite the general successes of the rural water supply and sanitation programme, government initiatives had reached few rural people.

28. Joint government donor EPI reviews have been conducted in almost all of the countries in the East Asia and Pacific region, resulting in a process of accelerating the achievement of vaccination coverage and ensuring sustainability of efforts for disease reduction and elimination. Evaluation results have also been used to strengthen government, donor and NGO commitments in achieving and sustaining EPI coverage.

E. South Asia

29. A review of evaluation results recently completed in the region touches upon lessons in the areas of education, health, sanitation and urban basic services (UBS).

30. An innovative approach to assessment of learning achievement in primary education is being tested and used in Bangladesh, as developed by the Bangladesh Rural Advancement Committee. It employs simple tools for assessing skills/knowledge, reading, writing and numeracy in children selected through a cluster sampling design. The results showed that achievement for boys was better than for girls, especially in urban areas; that non-governmental schools fared better than government schools; and that, not unexpectedly, achievement was related to years of schooling, parental education (more for boys) and economic status. This method has the potential for use in other countries.

31. In Nepal, assessments of achievement by the primary education project (PEP) compared with non-PEP districts showed that new entrant rates, promotion rates and completion rates, including passing the final examination, were higher. However, since it is not clear if the samples of schools selected were representative, or if PEP and non-PEP schools were matched on other potentially confounding factors, the validity of the results is diminished. Another assessment of enrolment rates in Bangladesh showed that, in general, for a joint Government/NGO collaboration on improving primary school management, enrolment rates increased, the number of drop-outs decreased and teacher preparedness and school management improved. However, this was tested in only a few areas and the results were not dramatically different, indicating the difficulty of changing existing systems.

32. The integrated child development services scheme of India is the largest programme of its kind for under-six-year-olds and their mothers. This evaluation focused on factors that would strengthen the otherwise weak participation of the most vulnerable under-three-year-olds. An evaluation of the centres supported by the Child-in-Need Institute showed that it is possible to improve child nutrition and growth, immunization coverage, ORS usage rates and home-based weaning and infant feeding practices through the effective involvement of women, youth and community groups. These groups selected workers, centre locations, mother-leaders, participated in training, used local foods and were linked to local health institutions.

33. An assessment of the village contact drive on safe motherhood in Rajasthan, India, where maternal morbidity and mortality are high, showed that the use of the technique of working with animators through the integrated child development services system improved the knowledge and awareness of mothers. However, knowledge of community workers and health workers generally did not change. Although the knowledge of delivery kits was high, their actual use was very low. The evaluation pointed out the importance of adequate information, education and communication materials as well as of close supervision and monitoring. The longer-term impact of this campaign-style drive needs to be assessed and the actual practice of safe procedures documented.

34. A national coverage survey in Pakistan organized by WHO and UNICEF at the request of the Government, in January 1991, showed adequate immunization coverage levels. However, a demographic health survey carried out six months earlier showed much lower results, differing as much as 20 to 30 percentage points. These very disparate results were discussed and a national task force was established, comprising medical professionals from the Ministry of Health as well as academia, to review EPI. This resulted in management and administrative changes and culminated in a third coverage survey, carried out by the Government in April 1993. The results show a low coverage of 36 per cent for under-one-year-olds for combined diphtheria/pertussis/tetanus vaccine/three doses of oral poliomyelitis vaccine and 75 per cent for 12- to 23-year-olds. This is being followed up with the Ministry of Health.

35. Evaluations of sanitation included village-level latrine production in Bangladesh. It was found that one third of the production centres were either inoperative or producing substandard quality products. Recommendations were made for improved marketing and private sector production in remote areas. An evaluation of latrine use in India (Orissa) found that latrines were considered beneficial by those who possessed them, although one quarter of the households were not aware of sanitation and hygiene linkages. It was recommended that latrines be provided to those who wanted them rather than through pre-set criteria of needy households and that water should be provided as well.

36. Two UBS reports from India were reviewed. The first investigated training components for two districts in Rajasthan, where community participation had led to improved awareness of the community's own capacities. The project has more full-time staff and volunteers than ever before, although the emphasis of activities seems to focus on physical construction rather than capacity-building through adult education, skills training and self-employment.

37. The second study was a needs assessment in the slums of five urban centres across India, focusing on women and the girl child. The findings showed the following: there was a lack of adequate basic facilities such as water or learning centres; girls were married off well before 18 years of age and illiteracy among women ranged from 25 to 67 per cent; and the coverage of tetanus toxoid vaccination for pregnant women was between 20 and 56 per cent. These results showed that the urban poverty problem and the resulting vulnerable, underserved population is continuing to increase.

F. Americas and the Caribbean

38. This brief synthesis touches upon lessons in the areas of feasibility assessment, sustainability and target populations.

39. In Central America, a number of evaluations/studies have been carried out using economic feasibility appraisal as the main criteria of analysis. By assessing cost-benefit ratios, material and labour input are compared with the social/economic benefit the project will bring to the target group. This has led to improvement in policy effectiveness by demonstrating potential sustainability. The relevance of using this assessment methodology to appraise projects has led to the provision of financial and material counterparts and

private sector contributions and considerable savings for poor communities. Positive findings in connection with the evaluation study of the water supply and environmental sanitation programme in Honduras demonstrated the very high rate of return of capital invested in building wells and making improvements in existing rainwater catchment systems to reduce water charges in the urban periphery of Tegucigalpa. This has led to a search for solutions for barrio (slum) residents, who have often contributed with their own savings and loans to relieve the water deficit in their communities. Most importantly, in the course of the project, attention has been paid to the recording of such benefits.

40. The evaluations that analysed prospects for sustainability found that success through a small-scale intervention does not guarantee successful duplication on a larger scale. An evaluation of a water supply and environmental sanitation programme in Central America underlined the need for a strategy to strengthen capacity-building of counterparts as a prerequisite for sustainability. It was found that the optimum conditions for organizational and financial sustainability include the existence of an active and self-managing community organization, a permanent institutional structure and, in the case of joint execution of programmes with NGOs, an understanding that the NGO has sufficient financial leverage to underwrite its own operating costs.

41. Implementation of projects related to women was rated satisfactory, however, conditions for sustainability and support for women's needs, including technical assistance, are not always sufficiently appreciated, as was found in Ecuador and Guatemala, and can reinforce a gender gap in the division of labour. This contrasts with the positive example of the Special Adjustment Facility for Latin America and the Caribbean (SAFLAC) project in Brazil, which has developed an effective methodology for the support of productive projects. Appropriate social and socio-cultural conditions need to be more carefully considered during project design and implementation to avoid adverse effects. Some evaluations highlight the need for flexibility, awareness and motivation when addressing the gender question, in keeping with the specific conditions of each culture, as found in the Caribbean, Ecuador and Bolivia.

42. Evaluations do not always analyse how the composition and selection of the target population was determined at the outset of the programme/project. Appropriateness of strategy in terms of reaching the most deprived segments is seldom questioned and the definition of the target group in projects is often vague. Evaluations of the UBS project in the Pacific coast of Colombia and the evaluation of PROANDES in Bolivia have striven to elicit participants' views and have established methodologies for this purpose.